

Executive Summary

The President's Fiscal Year (FY) 2011 National Drug Control Budget requests \$15.5 billion to reduce drug use and its consequences in the United States. This represents an increase of \$521.1 million (3.5 percent) over the FY 2010 enacted level of \$15.0 billion. These resources are

categorized around five major functions: (1) Substance Abuse Prevention, (2) Substance Abuse Treatment, (3) Domestic Law Enforcement, (4) Interdiction, and (5) International Support. Figure 1 details funding by function.

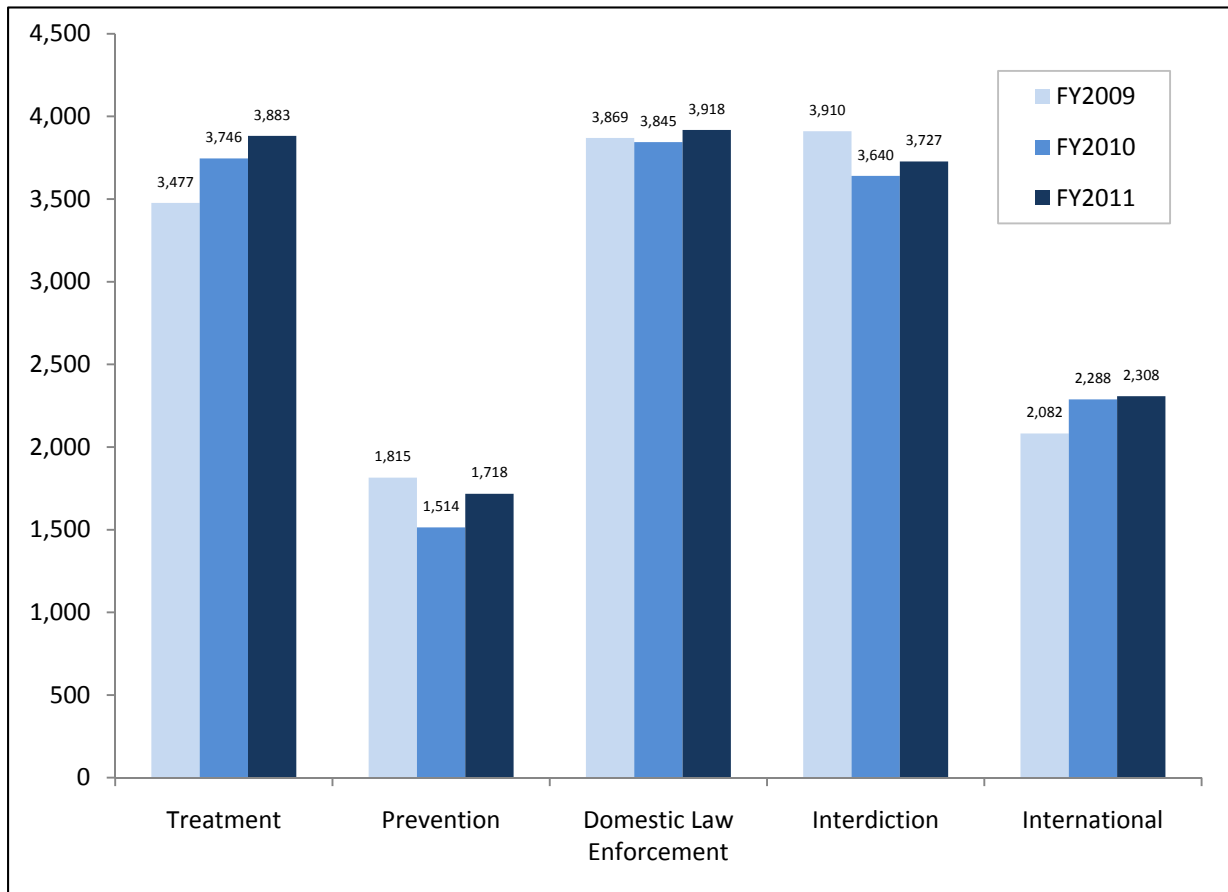


Figure 1: National Drug Control Funding by Function (Funding in Millions)

Substance abuse takes a terrible toll on the public health, public safety and financial resources of the United States. The Administration's national drug control policy seeks to reduce Americans' drug use and its related health, social and criminal problems. To help meet this goal, the Administration has developed five demand reduction priority areas. The

Administration is requesting \$151.3 million in new funding across the Federal government to strengthen efforts to detect, and prevent and treat illicit drug use in our communities and break the cycle of illicit drug use, crime, and incarceration.

These priorities are to:

1. Create a National, Community-Based Prevention System to Protect our Adolescents (\$22.6 million)
2. Train and Engage Primary Healthcare to Intervene in Emerging Cases of Drug Abuse (\$7.2 million)
3. Expand and Improve Specialty Addiction Care for Addiction (\$44.9 million)
4. Develop Safe and Efficient Ways to Manage Drug-Related Offenders (\$34.0 million)
5. Create a Permanent Drug Monitoring System (\$42.6 million)

Highlights of the FY 2011 Budget

Prevention

Federal resources totaling \$1.7 billion support a variety of education and outreach programs aimed at preventing the initiation of drug use. This represents a 13.4 percent increase over the FY 2010 enacted level; the major changes are highlighted below:

Substance Abuse and Mental Health Services Administration: Prevention Programs of Regional and National Significance

Department of Health and Human Services: \$254.2 million

(Reflects \$29.6 million increase over FY 2010)

In support of the first priority to create a national, community-based prevention system to protect our adolescents, the budget includes:

- **Prevention Prepared Communities:** The FY 2011 request includes \$15.0 million to fund an interagency pilot program for a national network of “prevention-prepared communities” intended to

offer a continuous system of evidence-based prevention interventions throughout the full course of adolescence.

- **Enhancing State Capacity to Develop/Support Communities:** This proposal also includes \$5.6 million to fund community prevention specialists within States to facilitate development of prevention-prepared communities and increase collaboration among State agencies in achieving these goals. Specific activities include establishing and maintaining a State-level drug abuse surveillance monitoring system, providing intensive technical assistance, and developing a State-wide support network to promote coaching and mentoring.
- **Evaluations:** The FY 2011 request includes \$2.0 million to fund an evaluation of the Prevention Prepared Communities demonstration pilot program. The evaluation design will be created in partnership with ONDCP and NIH.

Drug Free Communities (DFC)

Office of National Drug Control Policy: \$85.5 million
(Reflects \$9.5 million decrease from FY 2010)

DFC funding supports the development of community drug-free coalitions throughout the United States. The program provides up to \$125,000 per year, for a total of up to 10 years, in grant funding to local drug-free community coalitions; the funding must be matched at a minimum 1:1 ratio by local communities. Community coalitions strive to increase community involvement and effectiveness in carrying out a wide array of drug prevention strategies, initiatives, and activities.

Successful, Safe, and Healthy Students grant program

Department of Education: \$283.1 million
(Reflects \$107.3 million increase over FY 2010)

This new program would support student achievement and help ensure that students are mentally and physically healthy and ready to learn. The objective is creation of an improved school climate that reduces drug use, violence, and harassment and improves school safety and students' physical and mental well-being. Within the program, the Department would use \$144.6 million to award grants to assist State educational agencies and local educational agencies (LEAs) to develop and implement programs and activities that create safe environments; \$77.8 million would provide grant awards under the "Safe Schools/Healthy Students" initiative. Safe Schools/Healthy Students supports LEAs and communities in developing and implementing a comprehensive set of programs and services designed to prevent youth drug use and violence, support early childhood development activities, and provide needed student mental health services. Education funds this initiative jointly with the Department of Health and Human Services (HHS) and administers it in collaboration with both HHS and the Department of Justice.

National Youth Anti-Drug Media Campaign

Office of National Drug Control Policy: \$66.5 million
(Reflects \$21.5 million increase over FY 2010)

The Campaign uses media channels such as paid advertising, interactive media, and public information to educate and motivate youth to develop anti-drug beliefs and behaviors, and encourage adults to play a more effective role in keeping youth drug-free. Funding (providing for television, radio, newspaper, Internet, and non-traditional advertising) enables the Media

Campaign to address emerging drug issues among youth, such as prescription and over-the-counter drug abuse.

Consolidated Tribal Grant

Department of Justice: \$111.6 million
(Reflects \$111.6 million increase over FY 2010)

The Department of Justice has set aside 7% of the Office of Justice Program's (OJP) discretionary funding for grants or reimbursement programs under a new tribal criminal justice assistance program which consolidates previous OJP tribal funding streams and increases funding available for Indian Country public safety. In addition to funding grants to improve public safety outcomes in Indian Country, these grants will support training and technical assistance to improve tribal criminal justice outcomes, including drug and alcohol-related issues. (This program has been scored evenly between Prevention efforts and Domestic Law Enforcement efforts.)

Drug Impaired Driving Program

Department of Transportation: \$2.7 million
(Reflects no change from FY 2010)

The National Highway Traffic Safety Administration's (NHTSA) FY 2011 request supports the Drug Impaired Driving Program, which will provide public information and outreach efforts, as well as improved law enforcement training in the area of drug-impaired driving. Funding will also support data collection efforts to better develop programs and countermeasures to address the problem.

Arrestee Drug Abuse Monitoring II Program (ADAM)

Department of Justice: \$10.0 million
(Reflects \$10.0 million increase over FY 2010)

In support of the fifth priority to create a permanent performance monitoring system, the FY 2011 request includes \$10

million for Justice to expand and enhance the Arrestee Drug Abuse Monitoring II program (ADAM), which collects data on booked arrestees in ten U.S. counties on their drug abuse and related behavior.

Treatment

The FY 2011 Budget dedicates nearly \$3.9 billion in Federal funds for early intervention and treatment services for individuals with drug problems. This represents a 3.7% increase over the FY 2010 funding level. The major changes are highlighted below:

Substance Abuse and Mental Health Services Administration: Treatment Programs of Regional and National Significance

Department of Health and Human Services: \$635.4 million

(Reflects \$101.2 million increase over FY 2010)

In support of three priorities, train and engage primary healthcare to intervene in emerging cases of drug abuse, expand and improve specialty addiction care for addiction, and develop safe and efficient paradigms to manage drug-related offenders in community corrections, the FY 2011 Budget includes \$86.2 million for a wide array of new and expanded programs. These programs include:

- Training and Equipping Mainstream Healthcare - Establish an SBIRT Code Monitoring System: The FY 2011 request includes \$0.5 million to monitor and encourage State-wide Screening, Brief Intervention and Referral to Treatment (SBIRT) code adoption and implementation. SAMHSA will collaborate with the Centers for Medicare & Medicaid Services on the design, collection, and reporting of data for this initiative.
- Training and Equipping Mainstream Healthcare - Expand SBIRT Code Adoption Through Technical Assistance Initiative: The FY 2011 request also includes \$0.7 million to enhance and expand the Center for Substance Abuse Treatment's state financing academies, promote state-wide adoption of SBIRT via code adoption, and secure inclusion of SBIRT into health care credentialing policies.
- Expanding Identification and Management of Substance Use Disorders by Physicians: The FY 2011 request includes \$3.0 million to establish a pilot project based on its Physician Clinical Support System model to train generalist physicians and other health care providers in SBIRT and general drug use treatment clinical decision-making. The pilot will be assessed to determine whether there has been an increase in knowledge and applied practice by clinicians.
- Performance Contracting Pilot Project: The FY 2011 request includes \$6.0 million for a performance contracting pilot project for competitive grants to State or Tribal authorities. Grant funding will be used to enhance overall drug treatment quality by incentivizing treatment providers to achieve specific performance targets. Examples could include payment supplements for treatment providers who are able to connect higher proportions of detoxified patients with continuing recovery-oriented treatment, or for outpatient providers who are able to successfully retain greater proportions of patients in active treatment participation for longer time periods.

- **Enhancing Substance Abuse Care in Federal Health Care Systems:** The FY 2011 request includes \$25.0 million to add qualified and trained behavioral health counselors and other addiction specialists in HRSA-supported community health centers. HRSA will collaborate with the Department of Veterans Affairs and the Substance Abuse and Mental Health Services Administration by utilizing each agency's technical assistance expertise. This initiative will include training on performing Screening, Brief Intervention and Referral to Treatment (SBIRT) for the health counselors and other addiction specialists. (Note: As HRSA is not a drug-control agency, for display purposes only these resources are being shown as part of the SAMHSA drug control budget.)
- **Expanding ATR Grants:** The FY 2011 request includes \$9.9 million to expand the Access to Recovery Program (ATR), a recovery-oriented system of care approach to service delivery that uses electronic vouchers and client choice. Funds will support up to four new ATR grants.
- **Enhance Community Corrections Programs by Drug-Involved Offenders:** This proposal includes an increase of more than \$10.0 million to provide continuation funding for adult and juvenile treatment drug courts, and will support continuation of all the new treatment drug courts jointly funded with DOJ elements in FY 2010.
- **Adult Ex-offender Re-Entry Court Program:** The FY 2011 request includes \$5.0 million to expand the integration of the proven practices of drug courts into the management of drug-related offenders being released from incarceration back into the community. These grants provide screening, assessment and comprehensive treatment and recovery support services.
- **Creating Mechanisms to Collect/Use Community-Level Information:** The FY 2011 President's Budget request from SAMHSA includes an additional \$13.6 million to design, develop and field-test a community-level early warning and monitoring system to detect the emergence of new drug threats and to assist in identifying the public health and public safety consequences of drug use. The proposed system does not currently exist and thus will require substantial scientific input combined with practical considerations to achieve the system's intended purpose. Thus, SAMHSA is expected to work closely and collaboratively with NIDA, NIAAA, and ONDCP on all aspects of system development and deployment. (Note: This program has been scored as 80 percent (\$10.9 million) treatment and 20 percent (\$2.7 million) prevention.)
- **Preserving National Strategic Data Resources:** The FY 2011 President's Budget request includes \$19.0 million to expand and enhance the Drug Abuse Warning Network, which provides national and local-area estimates of drug-related emergency department visits and mortality; and improve the National Survey on Drug Use and Health by enhancing its ability to gather information such as that related to the chronic heavy drug using population. (Note: This program has been scored as 80 percent (\$15.2 million) treatment and 20 percent (\$3.8 million) prevention.)

Substance Abuse Prevention and Treatment (SAPT) Block Grant

Department of Health and Human Services: \$1,799.0 million

(Reflects no change from FY 2010)

The goal of the SAPT Block Grant is to support and expand substance abuse prevention and treatment services, while providing maximum flexibility to states. States may provide SAPT Block Grant funds to community- and faith-based organizations to provide services. Of the amounts appropriated for the SAPT Block Grant, 95 percent are distributed to states through a formula prescribed by the authorizing legislation. The SAPT Block Grant program in FY 2011 is funded at the same level as FY 2010, and will provide support to the current 60 jurisdictions (states, territories, the District of Columbia, and the Red Lake Band of Chippewa Indians in Minnesota) for a similar level of prevention and treatment services. These resources will support approximately 2 million treatment episodes. (Note: A minimum of 20% of the SAPT Block Grant is set-aside for the prevention activities.)

Additional Substance Abuse Treatment at the Indian Health Service

Department of Health and Human Services: \$83.9 million
(Reflects \$6.7 million increase over FY 2010)

In support of the priority to expand and improve specialty addiction care, the FY 2011 Budget includes \$4.0 million to add qualified and trained behavioral health counselors and other addiction specialists in IHS funded facilities. IHS, in partnership with Indian Communities, will continue to collaborate with the Department of Veterans Affairs and the Department of Health and Human Services' Substance Abuse and Mental Health Services Administration by utilizing each agency's technical assistance expertise. IHS will also

continue efforts to expand screening and brief intervention training for Indian health providers.

Second Chance Act

Department of Justice: \$50.0 million

(Reflects \$20.0 million increase over FY 2010)

In support of the priority to develop safe and efficient paradigms to manage drug-related offenders in community corrections, the budget includes the following initiatives:

- **Prosecution-led Drug Treatment Alternatives to Prison:** The FY 2011 request includes \$10.0 million to provide full funding of this activity authorized under Section 112 of the Second Chance Act. Funds will allow the Attorney General to make grants to State, Tribal, and local prosecutors to improve the infrastructure, knowledge, and systems needed to operate the judicial aspects of alternative to prison initiatives.
- **Adult Re-Entry Court Initiative:** The FY 2011 request includes \$5.0 million to integrate the proven practices of drug courts into the management of drug-related offenders being released from incarceration back into the community. Funds will be issued through a competitive bidding process and will be used to support training of probation officers and judges, creation of needed data systems, and expansion of drug testing capabilities.
- **Innovative Diversion/Re-Entry Programs for Juvenile Drug Offenders:** The FY 2011 request includes \$4.0 million to provide support to develop and test innovative strategies for serving juvenile offenders with co-occurring substance

abuse problems. Funds will be issued via a competitive bidding process.

VA Treatment

Department of Veterans Affairs: \$418.0 million
(Reflects \$13.0 million increase over FY 2010)

The Department of Veterans Affairs, through its Veterans Health Administration (VHA), operates a national network of substance abuse treatment programs located in the Department's medical centers, residential rehabilitation facilities, and outpatient clinics. The goal of VHA's Office of Mental Health Services is to provide effective, safe, efficient, recovery-oriented, and compassionate care for veterans with substance use disorders and mental illness, for those who are vulnerable to substance use disorders, and for those who are in continuing care to sustain recovery.

Residential Substance Abuse Treatment

Department of Justice: \$30.0 million
(Reflects no change from FY 2010)

The Residential Substance Abuse Treatment program for state prisoners was established to help states and local governments develop, implement, and improve residential substance abuse treatment programs in correctional facilities, and establish and maintain community-based aftercare services for probationers and parolees. Ultimately, the program goal is to help offenders become drug-free and learn the skills needed to sustain themselves upon return to the community.

Domestic Law Enforcement

Over \$3.9 billion in Federal resources support domestic law enforcement efforts, an increase of \$73.8 million (1.9%) over the FY 2010 level. The Departments of Justice, Homeland Security, and Treasury, with

support from the Department of Defense's National Guard, provide key domestic law enforcement support; the major changes are highlighted below.

Organized Crime Drug Enforcement Task Force

Department of Justice: \$579.3 million
(Reflects \$50.8 million increase over FY 2010)

The Organized Crime Drug Enforcement Task Force (OCDETF) Program is a partnership of federal law enforcement agencies and prosecutors, with assistance from state and local police departments, to identify, dismantle and disrupt sophisticated national and international drug trafficking and money laundering organizations. The FY2011 Budget Request adds funding for additional agents, analysts and attorneys performing investigative, intelligence, and prosecutorial work focused on the U.S. southwest border.

DEA Diversion Control Efforts

Department of Justice: \$291.8 million
(Reflects \$40.0 million increase over FY 2010)

DEA's Diversion Control Program (DCP) enforces the Controlled Substances Act and its regulations pertaining to pharmaceutical controlled substances and listed chemicals. The DCP actively monitors more than 1 million individuals and companies that are registered with DEA to handle controlled substances or listed chemicals through a system of scheduling, quotas, recordkeeping, reporting, and security requirements. The FY 2011 request includes funding for 174 new positions for pharmaceutical and chemical diversion control activities. These resources will support regulatory and enforcement efforts, including an expansion of Tactical Diversion Squads, intelligence support, and Internet investigations. The budget request also supports for the priority to train and

engage primary healthcare to intervene in emerging cases of drug abuse, with a \$3.0 million enhancement for the Prescription Drug Monitoring Program, which will initiate a program to establish a well-functioning standardized prescription drug monitoring program in every State to reduce prevalence of overdose deaths, drug interactions, diversion of prescribed medications, and early identification of patients at risk for addiction.

High Intensity Drug Trafficking Areas (HIDTA) Program

Office of National Drug Control Policy: \$210.0 million
(Reflects \$29.0 million decrease from FY 2010)

The HIDTA program was established by the Anti-Drug Abuse Act of 1988 to provide assistance to federal, state and local law enforcement entities operating in areas most adversely affected by drug trafficking. A central feature of the HIDTA program is the discretion granted to HIDTA Executive Boards to design a strategy to respond to the specific drug trafficking threats found in each HIDTA region and to develop initiatives to implement the strategy.

National Guard Counterdrug Support

Department of Defense: \$177.7 million
(Reflects \$43.4 million decrease from FY 2010)

The National Guard, through the Governor's State Plans, provides counterdrug support to federal, state, and local law enforcement agencies (LEAs), Community-Based Organizations (CBOs), and educational and government organizations that request assistance. Types of National Guard provided military-unique support include linguistics, communications, transportation, logistics, intelligence, engineering, and reconnaissance.

Interdiction

With an increase of \$86.9 million (2.4%) over the FY 2010 level, \$3.7 billion supports Federal interdiction efforts. The Departments of Homeland Security, Defense, and State perform activities designed to interrupt the trafficking of illicit drugs into the United States by targeting the transportation link; major changes are highlighted below.

U.S. Coast Guard Interdiction

Department of Homeland Security: \$1,208.1 million
(Reflects \$45.9 million increase over FY 2010)

As part of the United States Coast Guard's maritime security strategic goal, its drug interdiction objective is to reduce the flow of illegal drugs entering the United States by denying smugglers access to maritime routes. The President's Budget seeks funding for recapitalization of increasingly outdated and unreliable assets (e.g., cutters, aircraft, boats, and C4ISR) and infrastructure that supports this mission. Recapitalization is vital to preserving future surface, air, and shore asset capability, and is an essential investment for the Nation.

Caribbean Basin Security Initiative

Department of State: \$31.2 million
(Reflects \$31.2 million increase over FY 2010)

The Caribbean Basin Security Initiative will curtail the flow of illegal drugs into the region by strengthening the region's capacity to detect and interdict drug shipments, bring traffickers and other criminals to trial, and attack money laundering and associated corruption. FY 2011 drug control funding will support both bilateral and regional counternarcotics initiatives, including support for Sovereign Skies, interdiction, eradication, law enforcement reform and development, and demand reduction.

Western Hemisphere Regional Program

Department of State: \$37.5 million
(Reflects \$31.3 million increase over FY 2010)

To encourage the region's elected leaders' use of democratic processes and free market economies to improve the lives of their citizens, the Western Hemisphere Regional program strengthens democratic institutions; promotes prosperity; protects the democratic state; and invests in people. These pillars not only frame U.S. foreign policy priorities for the region, but also are used to build multilateral consensus.

Customs and Border Patrol: Border Security and Trade Facilitation at Ports of Entry

Department of Homeland Security: \$805.9 million
(Reflects \$5.8 million increase over FY 2010)

Customs and Border Patrol (CBP) uses its resources to support aggressive border enforcement strategies that are designed to interdict and disrupt the flow of narcotics and ill-gotten gains across our Nation's borders and dismantle the related smuggling organizations. CBP narcotics interdiction strategies are designed to be flexible so that they can successfully counter the constantly shifting narcotics threat at the ports of entry. CBP's overall budget requests an adjustment to base of \$46.9 million and 389 FTEs for an increase to Customs and Border Protection Officers (CBPOs) in the Office of Field Operations (based on CBP's drug budget methodology, \$5.8 million of this adjustment to base would be drug-related). The proposed adjustment will allow CBP to maintain staffing for critical positions.

Joint Interagency Task Force-South

Department of Defense: \$50.5 million
(Reflects \$5.3 million decrease from FY 2010)

Joint Interagency Task Force-South (JIATF-S), under the Department of Defense's U.S.

Southern Command, conducts counterdrug operations, intelligence fusion and multi-sensor correlation operation to detect, monitor, and interdict the South to North flow of illicit drugs and other narcoterrorist threats to the security of the U.S. Specific tasks include: detection, monitoring, tracking and hand-off of suspect targets to appropriate U. S. and participating nation law enforcement authorities; providing intelligence fusion support to law enforcement agencies and country teams; providing planning assistance for counternarcotics operations; and support to counternarcotics initiatives of U.S. Country Teams and partner nations.

International

The Budget requests over \$2.3 billion to provide international support, an increase of \$20.1 million (0.9%) over the FY 2010 level. The Departments of Defense, Justice and State perform a wide range of drug control activities primarily focused on or conducted in areas outside of the United States, focusing on the disruption or dismantlement of the most significant international drug organizations, and increasing the drug enforcement capability of partner nations. Major changes are highlighted below.

DoD CN Support in Central Asia

Department of Defense: \$501.5 million
(Reflects \$121.4 million increase over FY 2010)

In Afghanistan and Central Asia, the role of the Department of Defense (DoD) is to provide military assistance, with a focus on building the Afghan government's capacity to address the drug trade and to coordinate those efforts with Coalition Partners. DoD takes a regional approach, focusing on Afghanistan as the source zone and Pakistan and Central Asian States as the

transit zone. DoD bolsters regional partners' border security and CN efforts to stem the flow of drugs from Afghanistan and stop precursor chemicals from entering Afghanistan. In FY2011, a greater focus will be on interdiction than in previous years, as DoD has built the initial capacity of the Afghan CN vetted units that are now capable of conducting combined interdiction operations with DEA and U.S. military forces.

DEA International Enforcement

Department of Justice: \$435.3 million
(Reflects \$26.1 million increase over FY 2010)

The major focus of DEA's International Enforcement program is the disruption or dismantlement of the most significant international drug and chemical trafficking organizations. The FY 2011 request includes \$10.8 million in non-personnel funding to provide permanent funding for the expanded Sensitive Investigative Unit (SIU) program in Mexico, which is a key tool in the effort to disrupt and dismantle Mexican Drug Cartels. DEA's SIU program recruits, selects, and trains foreign police officers to work cooperatively with DEA in major case development and the exchange of intelligence.

Africa

Department of State: \$13.2 million
(Reflects \$10.0 million increase over FY 2010)

The FY 2011 request of \$13.2 million will be used for counternarcotics projects in West Africa, including Benin, Cape Verde, Ghana, Guinea, Guinea-Bissau, Nigeria, Senegal, Sierra Leone, The Gambia, and Togo. Programs will develop strong law enforcement investigative abilities and justice sectors capable of prosecuting and convicting narco-traffickers. While the majority of the cocaine transiting West Africa flows to Europe, the primary USG

concern is the destabilizing effect this trafficking will have on the region and the potential it represents for corroding good governance.

Colombia

Department of State: \$178.6 million
(Reflects \$26.6 million decrease from FY 2010)

The FY 2011 request continues a transparent and predictable glide path in transferring financial and management responsibility for counternarcotics and security activities to the Government of Colombia, while increasing funding for alternative development, rule of law, and humanitarian assistance. Decreases will be taken from INCLE-funded eradication and interdiction, counternarcotics, stabilization operations and transnational crime programs.

Changes to the National Drug Control Budget

The National Drug Control Budget structure includes two changes in this submission.

- A portion of the Department of Justice's new Flexible Tribal Grants Program (a seven percent set-aside from all discretionary OJP programs, which consolidates previous OJP tribal funding streams and increases funding available for Indian Country public safety issues, including drug and alcohol-related issues) has been scored as drug-related.
- The drug control budget includes for the first time funding for the Health Resources and Services Administration (HRSA), which will provide qualified and trained behavioral health counselors and other addiction specialists in HRSA-supported community health centers. As HRSA is not currently a drug-control agency, for display purposes only these

resources are being shown as part of the SAMHSA drug control budget.

Other Related Drug Control Program (ORDCP) Agencies and the Coming Review

Included in the appendix of this volume are ORDCP agencies that receive federal funds for drug control activities, but their primary mission does not include drug control, nor have readily identifiable drug control line items in the Budget of the President.

ONDCP coordinates and certifies the drug control budgets of federal departments and advises the President on what resources are necessary to implement the Administration's Drug Control Strategy. Parallel to the development of the President's Annual National Drug Control Strategy, ONDCP gathers and incorporates the various departments' planned -drug control spending into the National Drug Control Budget, displayed in this annual Budget Summary.

Currently, it is difficult to fully determine what activities are drug control related because of the multi-faceted nature of each department and the complex structure of the federal budget. To establish an accurate and reliable accounting of federal resources that are being spent on the drug control mission, ONDCP will undertake a thorough review of the Federal Budget during this calendar year. This review will include two parts: first, a review of how funding in the budget is categorized and characterized, and second, an examination of programs to determine their suitability for inclusion in the Federal Drug Control Budget.

At the present time, an agency's drug control spending is characterized as either "supply" or "demand." This categorization may present an incomplete picture of what some agency programs actually do, as some may be engaged in both demand and supply activities simultaneously. ONDCP is exploring appropriate ways to precisely capture how drug control activities are actually performed in the field. As the Administration develops the FY 2012 Budget Submission, ONDCP will, in consultation with stakeholders, consider other possible ways to display federal drug control funding.

The second part of the review will focus on the agencies and programs that should constitute the National Drug Control Budget. Working with the interagency and the Congress to fully examine this structure, ONDCP will consult with a group of interagency experts to review and recommend any required changes to the structure. This review will define what criteria should be used when determining if an agency should remain or be added to the federal drug control budget and what portion of that agency activities may be fairly counted toward drug control activities.

Once the review is complete, the FY 2012 Budget Summary will reflect the any revisions to the budget structure and framework as may be necessary.

Performance Measurement

The National Drug Control Strategy is a guide to our country on how to address the myriad of serious challenges posed by illicit drugs and by the illegal use of alcohol and

tobacco. ONDCP's mission is to coordinate Federal drug control agencies to achieve the goals outlined in this *Strategy* and to oversee agency activities towards this end. This entails assessing the *Strategy* and its supporting programs and activities. Additionally, ONDCP is required to submit annual progress reports to Congress.

Under the current paradigm, ONDCP evaluates the annual performance of Federal Drug Control Agencies by drawing on existing agency data systems required by the Government Performance and Results Act (GPRA) and national studies and surveys such as Monitoring the Future and the National Survey on Drug Use and Health to inform the assessment of Federal drug control agencies. Additional information is also employed from budget justifications, program assessments, and internal management documents.

ONDCP continues to work with the Federal drug control agencies to develop tailored performance metrics that reflect their contributions to the *Strategy*. Because the measures focus on the unique contributions of each agency, the measures cover a wide range of activities and data.

ONDCP is currently establishing a Performance Reporting System (PRS) that will provide the agency timely and accurate data on the Federal drug control budget agencies and will help to inform policymaking, planning, resource allocation, and program effectiveness. ONDCP will report on progress towards achieving these goals in the 2011 and subsequent strategies and reports. The design and implementation of the PRS has commenced and will continue in FY 2011. The first step is to establish the PRS and subsequently to

add new interagency measures, the lack of which was a shortcoming of the previous measurement system. This comprehensive system focuses not only on programs but also on Federal policies and activities.

An ambitious set of five year goals has been established in the *Strategy*. The PRS will identify second-tier performance measures and targets that support these overarching *Strategy* goals. The PRS will also identify agencies that contribute to each performance target. The system will establish with partner agencies, a process for collecting data and monitoring annual progress toward the outcomes that the *Strategy* is intends to achieve by 2015.

The system will be supported by a database that enables efficient reporting, analysis, and reporting of performance information in the PRS. This database will shorten the time required for agencies to provide information for documents such as the PRS Report and the Budget Summary. The PRS system will be assessed and refined as needed in fiscal years 2012 and 2013 – refinements include incorporating interagency performance targets for which data sources do not currently exist, identifying and rectifying gaps, and recalibrating metrics in response to new and emerging drug control threats.